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REQUEST FOR WITHDRAWAL
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Application Number	09/943,424	
Filing Date	August 30, 2001	
First Named Inventor	Kliger	
Art Unit	2684 26/1	
Examiner Name	Not Yet Assigned	
Attorney Docket Number	TIA-001 (8584/3)	

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Please withdraw me as attorney or agent for the above identified patent application, and AUG 2 3 2004 all the attorneys/agents of record. the attorneys/agents (with registration numbers) listed on the attached paper(s), of ECHNOLOGY CENTER 2600 the attorneys/agents associated with Customer Number NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number. The reasons for this request are: The client has requested return of their files, and full control of future prosecution.										
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2. Ch	•	nce address is NOT affe	•			ence to:		Ī	ı	ECEIVED AUG 1 3 2004 nology Center 260
	n <i>or</i> vidual Name	Mr. Avi Kliger								
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	Jason P. Fiorille	-/1								
Signature	fr	TILL			Registra	ation No	52	2,892		
Date August 6, 2004			Telephone No. (617) 310-8471							
NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.										

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Application Serial Number	09/943,424
Filing Date	August 30, 2001
First Named Inventor	Kliger
Group Art Unit	2681
Examiner Name	Not yet assigned
Attorney Docket No.	TIA-001 (8584/3)
Patent No.	Not applicable
Issue Date	Not applicable

CAT & TR	A DE L'ARGA	First Named		Inventor	Klig	Kliger			
TRANSMITTAL			Group Art Unit			2681			
			Examiner N	ame	Not	Not yet assigned			
	FORM		Attorney Do	ocket No.	TIA	-001 (8584/3)			
			Patent No.		Not	applicable			
			Issue Date		Not	applicable			
ENCLOSURES (check all that apply)									
☐ Fee	Transmittal Form		Copy of Notice Parts of Applie	e to File Missing cation		Notice of Appeal to Board of Patent Appeals and Interferences			
	☐ Check Attached ☐ Copy of Fee Transmittal Form		Formal Drawin	ng(s)		Appeal Brief (in triplicate)			
	Amendment/Response		Request For C Examination (I			Status Inquiry			
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	Petition for Extension of Time		of Attorney for	aration and Power Utility or Design		Additional Enclosure(s) (please identify below)			
			Patent Application		Agent	est for Withdrawal as Attorney or and Change of Correspondence ss (PTO/SB/83)			
	Information Disclosure		Small Entity S	tatement					
	Statement Form PTO-1449 Copies of IDS		CD(s) for large	e table or computer		RECEIVED			
	Citations		program			AUG 1 3 2004			
	Certified Copy of Priority		Amendment A	fter Allowance					
	Document(s) Sequence Listing submission Paper Copy/CD Computer Readable Copy		Request for Co Correction Certificate duplicate)	ertificate of of Correction (in		Technology Center 2600			
	Statement verifying identity of above		. ,						
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Direct all correspondence to: Patent Administrator Testa, Hurwitz & Thibeault, LLP High Street Tower 125 High Street Boston, MA 02110 Tel. No.: (617) 248-7000 Fax No.: (617) 248-7100				Respectfully submitted, Date: August 6, 2004 Reg. No. 52,892 Tel. No.: (617) 310-8471 Fax No.: (617) 248-7100 Respectfully submitted, Jacob P. Fiorillo Attorney for Applicants Testa, Hurwitz & Thibeault, LLP					
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